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lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A



2009 JAN 20 AM ID: 22

Des Moines, lowa 50319 Fax: 615-281-4073		s, see back of form SUMMARY PAGE		ONITO A	
COMMITTEE NAME (Must be	same as on Statement of Organ	nization)	_ ا		3' **
Sanders for Supervisor	•	•		FORM DR-2	
(1) Statewide/Legialative/Judgo (4) County Central Committee (1) Subdivision Candidate (8) Count (1) Local Ballot Issue	ty PAC (9) City PAC (10) School Be) State PAC (s) State Party ate (7) School Board or Other Political pard or Other Political Subdivision PAC	<u>.</u>	Rev. 07/2007) or Office Use On	DISCI.OSURE REPORT
CANDIDATE COMMITTEES Candidate Name Jason D. Sanders	ONLY:	Political Party (if applicable) Republican	1 1"	ogged in Scannod	
Office Sought County Supervisor		District (if Senate or House)		Audited	
Late reports are subject to possible the possible the possible the possible the possible to possible the possible	104	(319)929-3576 TELEPHONE		8A.401(3), the ca / - / 9 - 0 DATE S	
AM FILING A January 1 thi	и December 31, 2007	REPORT FOR (1) ELECTION	/(2)NON	-ELECTION YE	AR,
	eport date)	Indicate by		,	
•	O REPORT DATED	•	•	nmittoes, onter 12e	to of Fination
	adt and an all all all all all all all all all	Internation France DD 3			
	ation) report and attach Notice of to file reports until a DR-3 is filed.		County & which Ele	Local Committees clion is held ${\cal B}{\cal E}$, enter County In
STATEM	IENT OF CASH ON HAND		-		
committee This am	ning of the reporting period. (Tota ount MUST be the same as the c period or must be zero if this is fire	al of all funds held by the ash on hand at the end st report filed.)	\$	10.12	· · · · · · · · · · · · · · · · · · ·
	Y TAKEN IN THIS PERIOD				
Schedule A: Cash C	Contributions total (Attach Schedu	ile A) (*also see in-kind below)	•••••	00,0	
		F)		0.00	
Schedule H: Total S	ales of Campaign Property (Attac	on Schodule H)	•••••	0.00	
(Schedule	H applies to Candidates' Comm	nittees Only) SUB-TOTAL	\$	10.12	
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD		•		
		(**also see debts and loans below)	*********	0.00	
•	, , , , , , , , , , , , , , , , , , , ,	e F)		0.00	
	• •	ort balance must be zero)		10.12	
				1 2 72 52	
		lule E)			
		e F)			- ANA
		♥ 1 /······	······································	YES _	NO
CONSULTANT BREAKDOW	•		_		, • 1 - 2
CANDIDATE COMMITTEES	<u>ONLY:</u> PERTY (From Schodule H - Attac	nt Schadula H)	s	0.00	

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FOR	FOR	INSTRUCT	IONS.	SEE	BACK	OF	FOR
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COMMITTEE NAME (Must be same as on Statement of Organization)	
Sanders for Supervisor	J
	_

NOTE: Debts previously reported that ramain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

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L. RAS	ab Pb	m.
32,0	· Selection (B)	Section 1st

SCHEDULE D (Rev. 08/98)	INCURRED
	CK THIS BOX MENDING M

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F) An "incurred debt" is a debt for goods or services ordered of received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	EALANCE OWED AT CLOSE OF REPORTING PERIOD*
9/19/02	Jason Sanders 6120 30th Ave Drive Vinton, IA 52349	Menard's (sign material)	321.11
9/20/02	Jason Sanders 6120 30th Ave Drive Vinton, IA 52349	Ovation Interactive (theatre ad)	377.55
9/16/02	Jason Sanders 6120 30th Ave Drive Vinton, IA 52349	Office Max (envelopes & mailing labels)	19.46
9/19/02	Juson Sanders 6120 30th Ave Drive Vinton, IA 52349	Office Max (envelopes)	39.92
9/26/02	Jason Sanders 6120 30th Ave Drive Vinton, 1A 52349	Ideal Industries, Inc. (round steel for yard signs)	91.38
7/17/06	Jason Sanders 6120 30th Ave Drive Vinton, IA 52349	America's Campaign Store (advertising literature)	384.50
		SUB-TOTAL	3 1,263.92
	TOTAL DESTS OWED BY COMMITTEE	AT THE END OF THIS REPORTING PERIOD	\$ 1,263.92

"If actual figure is unknown, show "estimated" basido the figure.

of_1 (for Schedule D)

CANDIDATE COMMITTEES NOTE:

*incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-reising, polling, managing, or organizing services. Report on Schedule © the nature of performance and the estimated performance reasonably expected of the consultant.

	BACK OF FORM		SCHEDULE F	LOANS
	be some as on Statement of Organization)		(Rev. 02/08)	RECEIVE & REPAI
ers for Supervisor			CHECK	THIS BOX
: This achedule repo	rts money loaned to the committee which is deposited in	the committee account.	AMENDI	NG FORM
L UNPAID LOANS F	ROM LAST REPORTING FERIOD \$ 200.00		L	
	ANS RECEIVED <u>THIS REPORTING PERIOD</u> of loan, such as a bank, must be shown if a third porty is	s involved. Include loans from &	andidate's personal	funds.)
DATE	NAME AND ADDRESS OF LENDER	RELATIONSHIP TO CANDIDATE (If Applications)		OF LOAN
RECEIVED (MM/DD/YR)	(Include Endorser's Name, If Applicable)	O/MILE (III / III	\$	
Harrison -				
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			0.00	
		TOTAL (PART I)	ş <u>0.00</u>	
RT II - MONETARY (Loans forgive	LOAN REPAYMENTS MADE <u>THIS</u> REPORTING PERI on must be reported on Schedule E — In-kind Contributio	IOD	\$_0.00	
(Loans forgive	n must be reported on Schedule E - In-kind Contributio	IOD Ins.) RELATIONSHIP	ro Amoun	T REPAID
(Loans forgive	n must be reported on Schedule E — In-kind Contributio	IOD ns.)	ro Amoun	TREPAID
(Loans forgive	n must be reported on Schedule E - In-kind Contributio	IOD Ins.) RELATIONSHIP	ro AMOUN	T REPAID
(Loans forgive	n must be reported on Schedule E - In-kind Contributio	IOD Ins.) RELATIONSHIP	ro AMOUN	T REPAID
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(Loans forgive	n must be reported on Schedule E - In-kind Contributio	IOD Ins.) RELATIONSHIP	ro AMOUN	T REPAID
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(Loans forgive	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RÉLATIONSHIP T CANDIDATE* (IT APPI	FO AMOUN	T REPAID
(Loans forgive	n must be reported on Schedule E - In-kind Contribution NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) TOTAL Contribution	RELATIONSHIP CANDIDATE* (IT Applicant of the control of the contro	FO AMOUN	
DATE PAID (MM/DD/YR) Disclosure law require	n must be reported on Schedule E - In-kind Contribution NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) TOTAL Contribution	RELATIONSHIP CANDIDATE* (If Applicance of the control of response of the co	\$ 0.00 \$ 0.00	